Pto/Sb/122(06-03)

| CHANGE OF PE CORRESPONDENCE ADDRESS Application | | | | | |
|--|----------------|--|--|--|--|
| Address to: Commissioner for F | OCI 2 I 1003 M | | | | |
| P.O. Box 1450 Alexandria, VA 223 | PAR TO MANAGE | | | | |

| Application Number | 10/632,407 |
|------------------------|-----------------------------|
| Filing Date | August 1, 2003 |
| First Named Inventor | Jose F. Zamudio-Tena et al. |
| Group Art Unit | 1616 |
| Examiner Name | |
| Attorney Docket Number | 00216-594001 |

| Please change t | he Correspondence Address for the above | e-identifi | ed applica | tion to: | | |
|---|--|------------|------------|----------------|--|--|
| ⊠ Custon | stomer Number: 26163 | | | • | | |
| | | | | | | |
| Firm <i>or</i> Individual Name Robert C. Nabinger | | | | | | |
| Address | | | | | | |
| Address | | | | | | |
| City | | State | | Zip | | |
| Country | United States of America | | | | | |
| Telephone | (617) 542-5070 | Fax | (617) 542 | 2-8906 | | |
| This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). | | | | | | |
| I am the : | | | | | | |
| | Applicant/Inventor. | | | | | |
| | Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed. | | | | | |
| \boxtimes | Attorney or agent of record. Registration Number 33,431 | | | | | |
| | Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number 33,431 | | | | | |
| Typed or Printed Name Robert C. Nebinger | | | | | | |
| Signature | 1/1/1/ | | | | | |
| Date | October 19, 2005 | Telepl | hone | (617) 542-5070 | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | | | | |
| ☐ *Total of | forms are submitted. | | | | | |